

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN
See Instructions for "Service of Process by the U.S. Marshal"
on the reverse of this form

PLAINTIFF UNITED STATES OF AMERICA	COURT CASE NUMBER 2:07CV1104-mht
DEFENDANT EIGHTEEN THOUSAND FOUR HUNDRED (\$18,400) DOLLARS IN U.S. CURRENCY	TYPE OF PROCESS COMPLAINT, WARRANT & NOTICE
SERVE AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN MARA LYNN WILLIAMS
	ADDRESS (Street or RFD, Apartment No., City, State, and ZIP Code) 867 COUNTY ROAD 227 - CLANTON, ALABAMA 35045

SEND NOTICE OF SERVICE TO REQUESTER AT NAME AND ADDRESS BELOW:	Number of process to be served with this Form - 285	3
John T. Harmon United States Attorney's Office Assistant United States Attorney Post Office Box 197 Montgomery, Alabama 36101-0197	Number of parties to be served in this case	
	Check for service on U.S.A.	

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Address, All Telephone Numbers, and Estimated Times Available For Service)

ASSET IDENTIFICATION NO. 07-DEA-487737

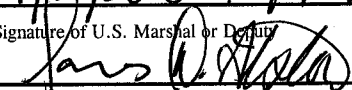
Signature of Attorney or other Originator requesting service on behalf of : 	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER (334) 223-7280	DATE 12/19/07
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SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process No. _____	District of Origin No. 2	District to Serve No. 2	Signature of Authorized USMS Deputy or Clerk K. Chaves	Date 1/4/08
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I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☒ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc. at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below).

Name and title of individual served (If not shown above). CARLOS WILLIAMS, SON OF DEFENDANTS				<input type="checkbox"/> A person of suitable age and discretion then residing in the defendant's usual place of abode.	
Address (complete only if different than shown above)				Date of Service 1/9/2008	Time 14:18 pm
				Signature of U.S. Marshal or Deputy 	
Service Fee \$135.00	Total Mileage Charges (including endeavors) \$97.00	Forwarding Fee	Total Charges \$232.00	Advance Deposits	Amount Owed to US Marshal or Amount or Refund

REMARKS:

1/9/2008 5:33 PM NOBODY HOME LEFT CARD
200 miles 2 ATTEMPTS
RETURNED AND FILED
JAN 14 2008

PRIOR EDITIONS MAY
BE USED

CLERK
U. S. DISTRICT COURT
MIDDLE DIST. OF ALA.
FORM USM 285 (Rev. 12/15/80)